



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln No.: 10/035,039)
)
 Filed: December 28, 2001)
)
 Applicant(s): CLASSON, et al.)
)
 Title: Adaptive Transmission Method)
)
 Art Unit: 2631)
)
 Examiner: Khanh C. Tran)
)
 _____)
 Attorney Docket: 7303.72464)
)
 Customer No.: 22242)
)
)

Confirmation No. 9174

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date.

June 9, 2006

James Wakely

Date James Wakely
 Registration No. 48,597
 Attorney for Applicant(s)

Mail Stop AMENDMENT
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment/reply in the above-identified application.

- An Appendix including amended drawing figures labeled as "Annotated Marked-up Drawings" is enclosed.
- A Petition for Extension of Time for reply within the 2nd month is attached.
- No additional fee is required.

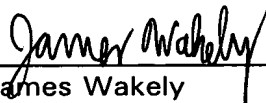
Fee Calculation For Claims As Amended

	As Amended	- Previously Paid For	**= Present Extra	x \$	Rate	= Additional Fee
Independent Claims	<u>7</u>	<u>7</u>	=		<u>0</u> x \$ 200.00	= \$ <u>0.00</u>
Total Claims	<u>52</u>	<u>38</u>	* =		<u>14</u> x \$ 50.00	= \$ <u>700.00</u>
Fee for Multiple Dependent Claims					\$ 360.00	
** At least 3					Total Additional Fee	\$ <u>700.00</u>
* At least 20						

Application No. 10/035,039
Amendment dated June 9, 2006
Reply to Office Action of January 10, 2006

- Applicant(s) assert entitlement to Small Entity Status (37 C.F.R. § 1.27), thus reducing the fee by half to: \$ 350.00
- A check in the amount of \$_____ is enclosed.
- Charge \$ 700.00 to Deposit Account No. 06-1135.
- The Commissioner is hereby authorized to charge any additional fees which may be required in this application under 37 C.F.R. §§1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 06-1135. Should no proper payment be enclosed herewith, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1135. A duplicate copy of this sheet is enclosed.

June 9, 2006
Date



James Wakely
Registration No. 48,597

FITCH, EVEN, TABIN & FLANNERY
120 South LaSalle Street, Suite 1600
Chicago, Illinois 60603-3406
Telephone: (312) 577-7000
Facsimile: (312) 577-7007



REQUEST FOR CONTINUED EXAMINATION (RCE) UNDER 37 C.F.R. §1.114

App. No.: 10/035,039)
 Filed: December 28, 2001)
 First Named Inventor: CLASSON, et al.)
 Title: Adaptive Transmission Method)
 Art Unit: 2631)
 Examiner: Khanh C. Tran)
 _____)
 Attorney Docket No.: 7303.72464)
 Customer No.: 22242)

Confirmation No. 9174

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June 9, 2006 _____
 Date *James Wakely*
 Registration No. 48,597
 Attorney for Applicant(s)

Mail Stop RCE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) of the above-identified application under 37 C.F.R. §1.114.

1. Submission required under 37 C.F.R. §1.114:

a. Previously submitted:

- Consider the amendment(s)/reply under 37 C.F.R. §1.116 previously filed on _____.
- Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.
- Other:

b. Enclosed:

- Amendment/Reply
- Affidavit(s)/Declaration(s)

Information Disclosure Statement (IDS)

Other:

2. Additional Items:

- Suspension of action on the above-identified application is requested under 37 C.F.R. §1.103(c) for a period of _____ months. *(Period of suspension shall not exceed three months; Fee under 37 C.F.R. §1.17(i) required.)*
- A petition for extension of time is enclosed.
- A return receipt postcard is enclosed.
- Other: Amendment Transmittal

Applicant(s) assert entitlement to Small Entity Status (37 C.F.R. § 1.27).

RCE Fee required under 37 C.F.R. § 1.17(e) without a claim of small entity status is: \$790.00.

RCE Fee required under 37 C.F.R. § 1.17(e) by an entity claiming small entity status is: \$395.00.

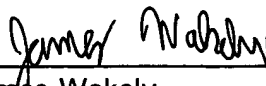
A check in the amount of \$_____ is enclosed.

Charge \$ 790.00 to Deposit Account No. 06-1135.

The Commissioner is hereby authorized to charge any additional fees which may be required in this application under 37 C.F.R. §§1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 06-1135. Should no proper payment be enclosed herewith, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1135. This sheet is filed in duplicate.

June 9, 2006

Date



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